

**COUNTY OF SAN DIEGO
VOLUNTEER REPORT FORM
PERIOD: JULY 1, 2002 - JUNE 30, 2003**

COUNTY OF SAN DIEGO
BOARD OF SUPERVISORS

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1. DEPARTMENT/COURT INFORMATION:

Department/Court: Health and Human Services Agency

Division/Unit: Consolidated Report*

2. VOLUNTEER PROGRAM BENEFITS:

- a. GENERAL VOLUNTEERS (this section should include community volunteer, student intern, groups, corporations, etc.)

No. Vol.	1919	Hours	359977	X	\$16.54	=	\$5,954,018.70
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Types of work performed by GENERAL VOLUNTEERS in this category:

See individual reports from regions/divisions

- b. INSTITUTIONAL VOLUNTEERS (this section should include court referrals, honor camp inmates, PIC/RETC, GAIN, etc.)

No. Vol.	1	Hours	960	X	\$16.54	=	\$15,878.00
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Types of work performed by INSTITUTIONAL VOLUNTEERS in this category:

See individual reports from regions/divisions

- c. SPECIALIZED VOLUNTEERS (this section should include utilization of Special Volunteers in positions requiring specific skills and/or expertise levels, for example, an attorney, physician, sports figure or celebrity). These specialized positions have verifiable compensation levels [VCL]. If you have such a volunteer, please indicate the position, hours and compensation level below.)

Position	Hours	X	VCL	=	Dollar Benefit
<u>24</u>	<u>2935</u>		<u>various</u>		<u>\$226,190.00</u>
					<u>\$0.00</u>

No. Vol.	0	Total Hours	2935	Total Value	\$226,190.00
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See individual reports from regions/divisions

No. of Volunteers	Hours	Dollar Benefit
1919	359977	\$5,954,019
1	960	\$15,878
0	2935	\$226,190

TOTAL VALUE =	\$616,567.00
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Hours	6427	X	Rate	various	\$159,524.11
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c. Other program costs (training materials/supplies, recognition costs, etc.):

Item : See individual reports Cost: \$197,077.00

Item : _____ Cost: _____

Item : _____ Cost: _____

TOTAL OF OTHER PROGRAM COSTS =

\$197,077.00

d. TOTAL OF PROGRAM COST (4a+4b+4c) =

\$451,207.26

5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:

a Total Dollar Benefits of Volunteers, Item 2d **\$6,196,086.70**

b. Total of Donations to Volunteer Program, Item 3 **\$616,567.00**

c. Subtract Total of program Costs, Item 4d **\$451,207.26**

TOTAL PROGRAM BENEFIT:

\$6,361,446.44

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6. RECRUITING:

Please describe your recruiting programs:

See individual reports from regions/divisions

7. SPECIAL VOLUNTEER PROGRAM ACTIVITIES/ACHIEVEMENTS:

Please describe any special activities and/or achievements your program was involved in during the period of this report:

See individual reports from regions/divisions

8. VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2003-04:

Please describe your program goals. Include activities, number of volunteers, recruitment, training, recognition and other goals:

See individual reports from regions/divisions

9. GENERAL INFORMATION:

Name of person completing report: Donna Pool

Phone: (619) 338-2944 Mail Stop: W477 E-Mail: donna.pool@sdcounty.ca.gov

Volunteer Coordinator: See individual reports

Phone: _____ Mail Stop: _____ E-Mail: _____

10. DEPARTMENT CERTIFICATION:


DEPARTMENT HEAD SIGNATURE

8/14/03
DATE

Please return this report by Friday, July 18, 2003, to the Clerk of the Board Department:
MS A-45; 1600 Pacific Highway # 402, San Diego, CA 92101; FAX (619) 685-2259.

*This information represents activity from the AIS Ombudsman, Edgemoor and RSVP programs; Alcohol and Drug Services; Mental Health Services; Public Health Services FIMR; Central Region Public Health; North Inland Public Health; North Central Public Health

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